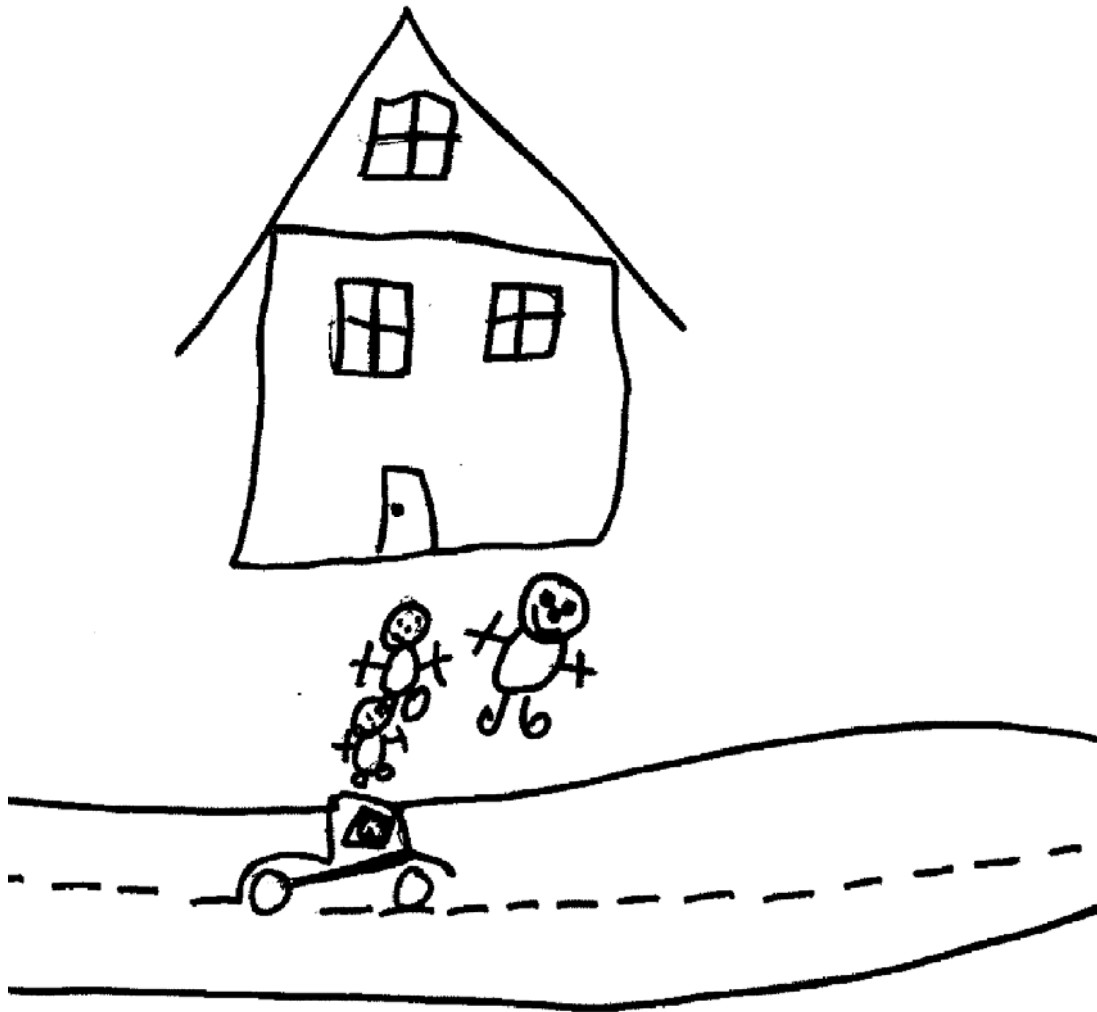


# PARENT HANDBOOK



CHILD DEVELOPMENT PROGRAM  
88 MSG/SVYC

WRIGHT-PATTERSON AFB

***WELCOME TO THE WRIGHT-PATTERSON AFB  
FAMILY MEMBER PROGRAMS FLIGHT!***

On behalf of the 88th Air Base Wing Commander, the 88th Support Group Commander, and the 88th Services Division Director, we would like to welcome you to the Wright-Patterson AFB Family Member Programs Flight.

The W-P Family Member Programs Flight consists of the Child Development Program, the Family Child Care Program, the Community Center, and the Youth Activities Program. Various activities are offered by each section of the Flight but only the Child Development Program is explained in detail in this handbook.

Our primary goal is to provide you with the highest quality program for young children and youth. We have been recognized by the Department of Defense and the Department of the Air Force as meeting this goal, but we hope your impression of us also agrees with this statement. Your comments and suggestions are always welcomed.

Our second goal is to provide you with an affordable service. Most of our program fees are charged according to your total family income. Hourly care is not charged according to income but has separate fees as defined by the center. Information about fees and charges are a separate handout.

We encourage participation by our parents. Each facility has a Parent Participation Group. The PPGs meet regularly and have a chairperson who attends the base-wide Family Member Programs Flight Advisory Committee and the Parent Advisory Board meetings. The committee and the board have direct access to the Mission Support Group Commander to ensure parent needs and opinions are heard.

If at any time, you feel you need additional information or wish to discuss any issue, feel free to contact your facility director or any of the following individuals:

Child Development Program Director	255-5053x313
Family Member Programs Flight Chief	257-6763
Services Division Director	257-2915

Again, welcome to our family!

## ***REGULATORY GUIDANCE***

All policies will be in compliance with the Military Child Care Acts of 1989 and 1996, DODI 6060.2, DODI 1402.5, AFD 34-8, AFI 34-248, and local SVY and SVYC Operating Instructions 34-1 through 34-7.

## ***PHILOSOPHY***

The practices of the Air Force Child Development are based on current knowledge of child development and early childhood education. We are responsible for supporting the development of the whole child, meaning all areas of development are considered inter-related and equally important. Our program acknowledges that children learn through active, hands-on involvement with their environment, peers, and caring adults. We respect each child's unique interests, experiences, abilities, and needs, thus allowing us to be responsive to and appropriate for each child. Children are valued as individuals, as well as part of a group. Likewise, our program respects and supports the ideals, cultures, and values of families in their task of nurturing children. We advocate for children, families, and the early childhood professions within our programs.

## ***CERTIFICATION AND ACCREDITATION***

The Child Development Program is certified annually by the Department of Defense and the Department of the Air Force. The certification process consists of unannounced base-level and higher headquarters inspections which cover a comprehensive checklist of quality criteria. The program is also accredited by the National Academy of Early Childhood Programs. This accreditation credential has been awarded to less than 10% of the nation's child care facilities.

## ***SERVICES OFFERED***

### **Full-time care**

- New Horizons CDC (Bldg 1403 - Area A)
- Wright Care CDC (Bldg 6933 - Prairies Area)
- Wright Field-South CDC (Bldg 630 - Area B)
- Wright Field-North CDC (Bldg 630 - Area B)

### **Hourly care**

Call 257-1086 or 257-4919 for reservations. Service is provided at the Kittyhawk Hourly Care Center (Bldg 1235 - Area C).

### **Part-day Preschool**

- Community Center (Bldg 6933 - Prairies)

### ***HOURS OF OPERATION***

The current hours of operation will be posted at the entrance to all facilities. All facilities will be closed on federal holidays. Give Parents a Break will not offer night or weekend care if a federal holiday falls on the Friday or Monday of that weekend.

### ***GUIDANCE POLICY***

Employees of the Child Development Program and parents/guardians while on the premises will conduct themselves within the parameters outlined in the program's Guidance Policy.

The guidance used in the centers will be implemented in such a way as to protect the child's self-esteem and emotional health. Helping children learn the appropriate ways to behave is more desirable than punishing them for their mistakes. Positive social relationships as children develop and mature are key to overall success as adults.

Acceptable guidance techniques include:

- Redirection;
- Planning ahead to prevent problems;
- Encouragement of appropriate behavior;
- Using consistent, clear rules; and
- Logical or natural consequences.

Unacceptable guidance techniques include any humiliating or frightening punishment. At a minimum, these include but are not limited to the following:

- Spanking, slapping, hitting, pinching, shaking, or any form of physical punishment;
- Verbal abuse, threats, or derogatory remarks about the child or his/her family;
- Withholding or forcing meals, snacks, or naps;
- Binding, tying to restrict movement, or placing in a confined space such as a closet, locked room, box, or similar place; and
- Punishment for lapses in toilet training.

While in or around the facilities, parents are required to follow the above mentioned procedures. Patrons are encouraged to consider their actions both in and out of the center, for the well-being of their child. Parents who fail to comply with the guidance policy will be referred to the Child Development Director or Family Member Programs Flight Chief for consultation. Repeated failure to comply can result in suspension of privileges.

### ***GENERAL POLICIES***

Daily schedules and weekly activity plans will be posted in each activity room. Daily outdoor play must occur for all ages, weather permitting. Staff will use good judgment and reduce the outdoor play time when the temperature is cold (32-65 degrees) or hot (85-100 degrees). Recently ill children who are restricted from outside activities may not attend if the weather permits outdoor play. No child shall be denied access to any activity if possible. Younger and older infants will follow their individual routines but a general daily schedule will be posted in each room.

The daily activities are developed from knowledge of individual and age appropriateness. No child will be restricted from participation in any activity unless the child's behavior warrants the restriction due to safety concerns. Parents should dress their children to participate fully and sometimes get dirty/messy. Parent requests to restrict children from "playing in the sandbox; doing the finger-painting; playing with certain children; etc." cannot be honored. Employees will attempt to protect children's clothing and other belongings but the center is not responsible for lost or damaged items.

A rest time is scheduled from approximately 1200-1400 daily (except in the Preschool). Infants will rest as their individual schedules dictate. Children will rest on cots with coverings and blankets as appropriate. Personal "softies" may be brought from home if desired. Children who will be in care for more than 6 consecutive hours will remain on their cots for a minimum of 30 minutes after which the staff will prepare quiet activities for the remaining time for those children who do not sleep. Infants may nap in a crib or on a cot as determined by room personnel. Pretoddlers and older children will nap on cots. Younger and older infants will sleep on their backs as recommended by the American Academy of Pediatrics as a preventive measure against Sudden Infant Death Syndrome (SIDS).

#### ***DAILY ADMISSION/PICK-UP***

Each time a child is admitted to the facility, the parent must complete the necessary information on the AF Form 1182, Youth Flight Register, including a valid phone number. Any new or unfamiliar adult to the desk staff must be prepared to present proof of identification before a child will be released to them. Patrons using hourly care must be prepared to present an ID card at each visit as proof of eligibility. The parent must escort the child to the appropriate activity room and enter the child's name and time of arrival on the AF Form 1930, Youth Flight Daily Attendance Record. For children under 3, the parent must also note the child's current health and any special instructions on the daily communication form. This form will be returned to the parent at day's end with a report of the child's activities. For children 3-5 years, this communication form is voluntary and will be used at the parent's request.

Parents of weekly children who will not attend due to illness or other situations should notify the center by 0800 each day. This will allow the program to serve an hourly care child if the needed. Parents will be contacted when children do not arrive at the program when expected (0900 in weekly care centers or other times according to program operations.)

Children 5 and under are not permitted to leave the facility unaccompanied. Children will only be released to persons (other than custodial parents) specified in writing on the AF Forms 1181 and 1182. No authorizations will be taken over the phone. Persons who are allowed to sign out children must be at least 14 years old.

Registration documents (AF Forms 1181 and 357, USDA Application, etc.) must be updated annually or as information changes.

#### ***APPROPRIATE DRESS FOR CHILDREN***

Children should be dressed appropriately. Shoes must be worn by walking children at all times in the event of emergency evacuation. During warm weather, children should not wear sandals because many of the materials on the playground can cause injury to bare feet. Shoulders should be protected from overexposure to the sun. During the cool weather, children should always have coats, hats, mittens/gloves, and snow boots. Extra clothing should be left at the center for those unexpected accidents. The children will participate in various "messy" activities designed to stimulate growth and learning. Parents should consider the durability of their child's clothing. Special care should be taken to ensure the proper clothing is brought for infants. Clothing should be labeled with the child's name. The center cannot be held liable for lost or damaged personal items.

Only disposable diapers will be used. Parents must provide the diapers as well as diaper wipes for use during changing to help prevent the possibility of allergic reaction. No diaper ointments will be applied during diaper changing unless directed by a medical authority in writing. Baby powder or cornstarch is not allowed at any time.

### ***10 HOUR RULE***

Children may not remain in the center for more than 10 consecutive hours unless a waiver signed by the Mission Support Group Commander is on file. Weekly fees cover 10 hours of care per day and any amount over the 10 hours will be an extra charge. A waiver of the 10 hour rule does not waive the extra charge for care over 10 hours per day. Parents who pick up their children after closing hours will be charged a late fee of \$1.00 per minute. The late fee is due at the time of pick-up.

### ***USDA FOOD PROGRAM***

Meals or snacks are served every 2-3 hours. All children will be enrolled in the USDA Food Program and offered food from pre-approved menus. Any child with permanent special dietary needs must have a completed "Special Needs Documentation Package" (updated annually) on file in the center. If the dietary need is for approximately 30 days or less, a note from the child's physician will substitute for the special need forms. Children with restricted diets due to religious/cultural beliefs must have a letter from the parents stating specifically what foods are not allowed.

Only food prepared at or for the center is served for meals, snacks, and special events such as birthday parties. No foods may be brought into the centers by parents. The center food program is funded by USDA and must follow very strict guidelines or the funding could be lost. Special parties will be sponsored by the center. Birthdays will be celebrated monthly as scheduled by the individual facility. Parents may donate party favors, decorations, cards, etc., and are always invited to attend the festivities.

The center will provide all food for the child. Infants will be provided baby food and infant formula. Breast feeding mothers may provide breast milk in plastic bottles or may visit the center to feed their infants. Bottled breast milk is discarded after the child refuses it during a mealtime. For safety reasons, we ask parents to only bring in plastic bottles. Bottles brought to the center must have the child's name and the current date labeled on it. No medications or other liquids may be mixed with the formula unless under written authority from the physician (specific information about storage and serving is required). When the child is ready for whole milk, the center will provide the milk and parents will provide clean, plastic bottles labeled with the child's name only until such time as the child can use a sippy cup.

Menus of possible baby foods will be provided to parents on a regular basis depending on the child's age. Parents will note which foods the child has tried without complications and the center will develop the individual menu for the following week. Parents will be provided the menu in writing. Daily confirmation of foods eaten will be included on the daily communication form until the child has made the full transition to table food. After this transition parents may request daily confirmation of foods eaten.

### **Civil Rights Act**

Our centers are operated in accordance with USDA policy which does not permit discrimination because of race, color, national origin, sex, age, or disability. Any person who believes he or she has been

discriminated against in any USDA related activity should write immediately to the Secretary of Agriculture, Washington, D. C., 20250.

### ***CHILDREN WITH SPECIAL NEEDS***

Children with special needs require screening through the Base Pediatric Liaison prior to acceptance for care. This is to ensure the appropriate care can be provided by the center staff. Additional training is provided to staff as the need arises. A "Special Needs Referral Package" may be obtained from any child development center. Instructions are provided with this package.

Once the package is completed and submitted to the center, it is reviewed by the center director or designee for completeness. The package is sent to the Pediatric Liaison for consideration. If the child has a military sponsor, the Liaison can often access the child's records from the Med Center but may need to contact the parent or previous doctors for required information. If the child has a civilian parent, the Liaison will contact the child's physician(s) as listed in the package to ensure all information is available. A form to give written permission may be found in the referral package.

The Pediatric Liaison will give specific directions to the center staff about the care of the child. Some modifications to the environment can be made. A change to the required adult:child ratios can also be made. Special training of staff may be required. Once all requirements are met, the child may be accepted for care.

### ***ADMINISTERING MEDICATIONS***

Children with special needs or temporary illnesses often need medications while attending day care. Our job is to provide the minimum amount of medications possible only to prevent the disruption of a client's duty day. We will not provide medications simply because it is more convenient for the parent or to prevent diseases (such as diaper rash) or elevated temperatures unless directed by a physician.

All medications, including over-the-counter medications, must be prescribed by a doctor either by prescription label on the medication or by official note from the medical authority. An AF Form 1055 will be completed/signed by the parent and initialed daily prior to dispensing the medication. Parents cannot pre-initial the 1055 for subsequent days; permission must be given daily. If a child requires the same medication for more than 30 days, a "Special Needs Referral Package" must be completed annually in addition to the AF Form 1055.

Medications are only given to cure an illness or disease except for children with special needs. Diaper ointments, Tylenol (or other fever reducers), cold medicines, etc. will not be administered because a parent wishes to prevent a disease or suppress a child's symptoms so that the child may remain in day care. Diapers are checked and changed hourly which should prevent most diaper rashes. For certain cases under a doctor's direction, some of the above mentioned medications may be administered.

Medications will be administered between 1000 and 1400 hours daily unless otherwise specifically prescribed by the doctor. For example, if a medication is prescribed 3 times daily, the center will administer the 2nd dose at lunch time while the parents must administer the early morning dose and the evening dose at home. This includes meds which require food even though we offer breakfast, afternoon snack, and some dinners. If a prescription calls for 4 times daily, the medication will be given before lunch time and at snack time while the other 2 doses will be given at home. Similar procedures will be followed if a medication is prescribed every 6 hours, 8 hours, etc. We will give no more than 2 doses of the same medication to an individual child unless special circumstances arise which must be verified in writing from a medical authority.

To ensure proper sanitation and measurement, the parents must provide the dispenser and a plastic bag for storage of the medications. All medication dosages must be clearly and accurately marked.

Medications will be kept either in an isolated refrigerator or in a locked container inaccessible to children.

The medications will be administered by staff that has been specifically trained annually to dispense medications. Eye drops and ear drops for contagious diseases are not allowed.

Sunscreen has been authorized for use without prescription and will require only an annual signature by the parent on a permission sheet. Each facility will provide sunscreen that has been approved by the Pediatric Liaison. If desired, the parent may provide an alternate sunscreen which has been approved by the Liaison.

### ***ILL/MILDLY ILL CHILDREN***

Children who are unable to fully participate in the day's activities should not be in attendance. We understand this can be a hardship on working families, but for the health and safety of the other children in care, the program will be very strict on the admittance of ill or mildly ill children. If a child is sent home ill from the center, time limits and other instructions will be given to the parents as to the return of the children to our care.

We would like to strongly suggest you consider finding an emergency backup care provider. This will enable to you to attend work even though your child requires home care while ill. Mildly ill care is also available through the Family Child Care Program. Your center can provide you with information.

### ***NO SMOKING/DRUGS/ALCOHOL ALLOWED***

All facilities will be non-smoking in all areas accessible to children including outdoor areas. The use of alcohol or illegal drugs is not allowed in facilities used for child care. Adults picking up their children who have obviously been drinking will be asked if a designated driver is present or if a cab may be called. If the parent refuses our help, the Security Forces will be notified.

### ***PARENT INVOLVEMENT***

Each facility shall organize a Parent Participation Group (PPG) with a parent chairperson. The PPG chairperson will represent the center on the base-wide Parent Advisory Board (PAB). The PPG chairpersons shall also be invited to attend the quarterly Family Member Programs Flight Advisory Committee meetings.

Each PPG shall meet at least quarterly and maintain recorded minutes of each meeting. The PAB will meet following the Family Member Programs Flight Advisory Committee meetings with the Support Group Commander and the Family Member Programs Flight Chief and/or the Child Development Program Director.

Each PPG shall develop a Parent Participation Plan annually. The plan will consist of parent involvement activities to encourage parent participation in the centers and extend the relationship between family and center. At least one of the activities must focus on parent education or child abuse prevention.

Parents are allowed access to their children's rooms at all times.



## ***AGGRESSIVE AND INAPPROPRIATE BEHAVIORS***

All child experiences while in day care are considered confidential and will not be discussed with anyone other than the applicable caregivers, management staff, and individual child's parents. In the rare event when the positive guidance techniques may not be effective on certain behaviors, the following procedures will be followed:

Repeated aggressive acts against children, adults, or equipment may indicate a special behavioral problem. A conference will be held with parents, caregivers, and management to decide the appropriate course of action. A thorough investigation will be conducted to determine the cause of the behaviors. It may be decided that a large group environment is not suited to the individual child's needs.

Parents will be notified of any unacceptable behaviors that endanger the health and safety of their child or other children in the center.

Aggressive behaviors include acts of violence against other children and adults; willful destruction of center property; or the repeated disregard for the authority of the center employees.

Biting - Younger children, normally under the age of 3, sometimes use biting as a way to handle frustrating situations. Each child's reason to bite is as individual as the child. Unfortunately, biting is much more prevalent in large group environments than in areas where the staff:child ratios are very low. Adults must remember that children begin their exploration of the world with their mouths. Chewing on teethingers may not be much different in their eyes than biting another child. When a child bites, a record will be kept on the biter to assist staff in determining if a pattern of biting may exist. If the bite breaks the skin, both the victim's parents and the biter's parents will be immediately notified so that contact to physicians may be made.

If a pattern of biting develops (such as 2-3 times in a week or 4-5 times in a month although this is not a concrete number), a conference will be held with parents, caregivers, and management to determine the appropriate course of action. Alternate care for chronic biters will be discussed as needed.

Biters over the age of 36 months are not as frequent as younger children. Special concern will be given to older biters.

## ***CHILD ABUSE IDENTIFICATION, PREVENTION, AND REPORTING PROCEDURES***

The employees of the child development program will be properly screened, trained, and accountable for implementation of child abuse identification, prevention, and reporting procedures. Any suspected child maltreatment situation will be reported without regards to personal bias or influenced judgment. All employees are mandated to report suspected abuse and/or neglect.

Any employee who fails to report suspected abuse or neglect is subject to disciplinary action, including termination, and possible civil prosecution. No personal bias may enter the decision to report including friendships, working relationships, familial relationships, etc. The decision to label the situation as abuse/neglect is not made at the center level. All situations are only suspect until investigative authorities have gathered all information and made appropriate recommendations.

All employees of the Child Development Program must be properly screened by personnel agencies and supervised while on duty. References from 2 previous employers (preferably the most recent 2) will be contacted prior to selection for employment. All child development employees must satisfactorily complete an Installation Records Check (IRC) before in-processing for federal employment. During in-processing, a State Criminal History Records Check (SCHRC) and a fingerprint check (NAC or NACI)

will be initiated. All positions in the Child Development Program are contingent upon positive completion of these criminal history background checks. Until all checks are cleared, the employee must work within line-of-sight of another employee who has completed checks.

Closed circuit television will be installed in each activity room or facilities with a capacity of 45 children or more. The monitors will be viewed by front desk personnel who have completed checks. Each activity room will be under CCTV supervision at all times. Convex mirrors will be installed in areas to assist staff ability to monitor children.

A management level (GS/CC-05 or higher) supervisor must be present in each facility during all hours of operation. The name of this supervisor will be posted for public notice.

Employees suspected of abuse, neglect, or not complying with the program's guidance policy will be immediately removed from their work site and a written referral made to the Child Development Director and Family Member Programs Flight Chief, and to the Family Advocacy Office as appropriate. The employee may not return to their duty site until proper action has been taken which may include retraining, an investigation, or termination in severe cases.

Each employee is responsible for identifying child maltreatment as the situations arise. Children shall be screened upon arrival for signs of illness or maltreatment. Any suspicious mark or bruise may be discussed with the

parent if appropriate. The discussion will be a fact-finding mission only and no discussions will be held with any parent about possible reporting until the facility director or designee has been informed.

If a suspicious bruise or mark is discovered after the parent leaves, the facility director or designee may call the parent at work and request the facts. Again, no discussion of reporting will be held. Depending on the situation or history with each family, this contact may or may not be made to the parent prior to reporting to the FAO.

If a child recounts suspicious stories to an employee, the supervisor will be called to verify the story with the child. No call will be made to the parent by staff. After questioning the child, any consistent/suspicious stories will be treated as any other child maltreatment suspicions.

Children shall be supervised using approved techniques that will minimize the potential for child abuse. All children shall be under the supervision of an assigned adult and that adult will know the whereabouts at all times. Room personnel will maintain up-to-date AF Forms 1930 which indicate responsibility assignments. No child shall be left unattended for any reason. Each child will be assigned to a single adult present in the room.

Multiple adults will not share the responsibility for individual children on the AF Form 1930.

Only those persons, other than parents, on official business will be allowed in the facilities. Visitors on official business will be required to register on the Visitor's Log, wear identification, and be escorted while in the facility.

### ***EMERGENCY PROCEDURES***

The Child Development Program will be prepared for emergencies including fire evacuation, severe weather, accidents/injuries, bomb threats, military mobilizations, and other unexpected disasters.

Child napping - It is not uncommon for noncustodial parents to attempt to take their children without consent of the custodial parent. It is the policy of the Child Development Program to ensure all

appropriate staff is well informed of custodial problems between parents. The custodial parent must ensure that management is aware when problems arise so that the appropriate notifications to staff may be made. The AF Form 1181 will be used to determine who has authority to sign out children so custodial parents must ensure this form is current at all times. Persons other than the custodial parent and emergency contact must be authorized daily in writing on the AF Form 1182 (or other written documentation) when they will be authorized to sign out the child. In the event a noncustodial parent or other person not authorized attempts to kidnap a child from the center, immediate notification to the Security Forces using 911 will be made. The clerk or designee will attempt to gather information on the perpetrator including personal description and description of any automobile. After contact to the SFs is made, the supervisor will contact the custodial parent and initiate the chain of command reporting procedure. Witnesses will not be allowed to leave the scene until all statements are gathered by the SFs.

Parents under the Influence of Alcohol or Other Drugs - Children will not be released to parents who are obviously under the influence of alcohol or other drugs unless a designated driver is present. If the impaired parent forces the issue and removes the child without center permission, the Security Forces will be contacted with the parent's name, organization, home address, and car description. The supervisor on duty will initiate the chain of command reporting procedure as appropriate.

Minor injuries - All room staff are certified in Pediatric First Aid with Rescue Breathing. Emergency first aid will be applied by staff as needed. No medications will be administered without written consent from a medical authority and parents. First aid supplies will be kept on hand in each facility to include antibacterial soap, band-Aids, bandages, ice packs, tweezers, gauze, thermometers, disposable gloves, bleach water, and biohazardous materials kit. All blood exposures will be treated using universal precautions against the threat of HIV, HBV, or other communicable diseases. An AF Form 1187 will be completed to record the specifics of the minor injury and parents will be notified at work as soon as possible.

Major injuries - In the event an injury to child or staff requires more than simple first aid, an ambulance from the base Medical Center will be called. There may be a charge for this service to civilian parents. As soon as the ambulance is called, the parents or other appropriate person will be contacted. An employee of the center will accompany the child on the ambulance and wait in the emergency room until a parent arrives. The AF Form 1181 will be taken with the employee to authorize the emergency medical treatment. The center director or supervisor on duty will immediately initiate the chain of command reporting procedure and appropriate reports (AF Form 1187) will be made to HQ AFMC/SVP for all instances when child is hospitalized as the result of an injury.

### ***MILITARY MOBILIZATIONS/RECALL***

The Child Development Centers may play an important role in most base-wide military exercises. If a military recall is conducted outside normal hours of operation, the SVYC Recall Roster will be initiated to ensure the weekly centers open within 30 minutes of notification. The centers will remain open for 13 hours from the onset of the recall or until all children are picked up.

If the recall commences during normal hours of operation, parents should contact the center to notify staff if extended hours are needed. An hourly rate will be charged for any time past the normal 10 hours of care during mobility/base exercises only. The additional charge may be deferred until the next fee payment.

***GIVE PARENTS A BREAK PROGRAM***  
***(GPAB)***

The Air Force Aid Society and the Wright-Patterson AFB Child Development Program recognizes that Air Force families are subject to unique stress due to the nature of military life--deployments, remote tours of duty, extended working hours, etc. Families are often separated from spouses as well as from extended family members who might otherwise offer support. The purpose of this program is to offer eligible parents a few hours break from the stresses of parenting. Parents may use this time to fill their personal needs. GPAB hours are available on the first Saturday of each month from 1700-2200. Contact your unit's First Sergeant for more information or the Family Support Center.